Case 2:18-bk-51538 Doc 1 Filed 03/19/18 Entered 03/19/18 18:10:41 Desc Main Document Page 1 of 47

| Fill in this information to identify your case: | | |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| SOUTHERN DISTRICT OF OHIO | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | ☐ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | | |
|-----|---|---|---|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | |
| 1. | Your full name | | | |
| - | Write the name that is on your government-issued | Robert | Fintage | |
| | picture identification (for example, your driver's license or passport). | First name Elige | First name | |
| | | Middle name | Middle name | |
| | Bring your picture identification to your meeting with the trustee. | Cummerlander, Sr. Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) | |
| 2. | All other names you have used in the last 8 years | | | _ |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-0591 | | _ |

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Debtor 1 Robert Elige Cummerlander, Sr.

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | | |
|----|---|---|--|--|--|--|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. | | | | |
| | Include trade names and doing business as names | Business name(s) | Business name(s) | | | | |
| | | EINs | EINs | | | | |
| 5. | Where you live | 5405 Walakina Da | If Debtor 2 lives at a different address: | | | | |
| | | 5465 Walshire Dr. Columbus, OH 43232 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | | |
| | | Franklin County | County | | | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | | |
| 6. | Why you are choosing this district to file for | Check one: | Check one: | | | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | | |
| | | | | | | | |

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Debtor 1 Robert Elige Cummerlander, Sr.

Case number (if known)

| | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | | |
|-----|---|---|----------------|---|------------------------------|-------------------|---------------------------|---|--|
| | choosing to file under | · | | go to the top of pa | ige i and check the a | арргорпате вох. | | | |
| | | ☐ Chapter 7 ☐ Chapter 11 | | | | | | | |
| | | | apter 12 | | | | | | |
| | | _ | | | | | | | |
| | | ■ Cna | apter 13 | | | | | | |
| 8. | How you will pay the fee | a | about how yo | ou may pay. Typica attorney is submitt | ally, if you are paying | the fee yourself, | you may pay with cash | r local court for more details n, cashier's check, or money n a credit card or check with | |
| | | | | | ation for Individuals to Pay | | | | |
| | | | • | e <i>Filing Fee in Installment</i> s (Official Form 103A). quest that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a | | | | | |
| | | b | out is not req | uired to, waive you | ir fee, and may do so | only if your inco | ome is less than 150% of | of the official poverty line that this option, you must fill out | |
| | | | | | | | rm 103B) and file it with | | |
| | | | | | | | | | |
| 9. | Have you filed for bankruptcy within the | □ No. | | | | | | | |
| | last 8 years? | Yes | | | | | | | |
| | | | District | SDOH | When | 8/13/15 | Case number | 15-55279 | |
| | | | District | | When | | Case number | | |
| | | | District | | When | | Case number | | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes | | | | | | | |
| | | | Debtor | | | | Relationship to y | /ou | |
| | | | District | | When | | Case number, if | known | |
| | | | Debtor | | | | Relationship to y | /ou | |
| | | | D: | | When | | Case number, if | known | |
| | | | District | | | | | | |
| 11. | Do you rent your | ■ No. | Go to li | ine 12. | | | | | |
| 11. | Do you rent your residence? | ■ No. | Go to li | | ed an eviction judgme | ent against you? | | | |
| 11. | | | Go to li | | ed an eviction judgme | ent against you? | | | |

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Debtor 1 Robert Elige Cummerlander, Sr.

Case number (if known)

| Par | t 3: Report About Any Bu | sinesses | You Own | as a Sole Proprie | tor | | |
|--|---|--|--------------------------------------|--|---|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | | | | | | |
| | | ☐ Yes. | ☐ Yes. Name and location of business | | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | of business, if any | | | |
| | If you have more than one sole proprietorship, use a | | Numbe | er, Street, City, Sta | e & ZIP Code | | |
| | separate sheet and attach it to this petition. | | Check | the appropriate bo | x to describe your business: | | |
| | | | | Health Care Busin | ness (as defined in 11 U.S.C. § 101(27A)) | | |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) | | |
| | | | | Stockbroker (as d | efined in 11 U.S.C. § 101(53A)) | | |
| | | | | Commodity Broke | r (as defined in 11 U.S.C. § 101(6)) | | |
| | | | | None of the above | | | |
| 13. Are you filing under Chapter 11, the court must know whether you are a small business debtor so that it can deadlines. If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance she operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, following the following statement in 11 U.S.C. 1116(1)(B). | | | | a small business debtor, you must attach your most recent balance sheet, statement of | | | |
| | debtor? For a definition of small | ■ No. | I am n | ot filing under Chap | oter 11. | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am fil Code. | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy | | | |
| | | ☐ Yes. | I am fi | ling under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | |
| Par | t 4: Report if You Own or | Have Any | Hazardo | us Property or An | y Property That Needs Immediate Attention | | |
| 14. | Do you own or have any | ■ No. | | | | | |
| | property that poses or is alleged to pose a threat of imminent and identifiable hazard to | ☐ Yes. | What is t | he hazard? | | | |
| | public health or safety? Or do you own any property that needs | | If immedi | iate attention is | | | |
| | immediate attention? | | | why is it needed? | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | the property? | | | |
| | | Number, Street, City, State & Zip Code | | | | | |

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Debtor 1 Robert Elige Cummerlander, Sr.

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Document Page 6 of 47 Case number (if known) Debtor 1 Robert Elige Cummerlander, Sr. Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Robert Elige Cummerlander, Sr. Signature of Debtor 2 Robert Elige Cummerlander, Sr.

Executed on

MM / DD / YYYY

Signature of Debtor 1

Executed on March 19, 2018

MM / DD / YYYY

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Debtor 1 Robert Elige Cummerlander, Sr.

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Athena Inembolidis | Date | March 19, 2018 |
|--|---------------|------------------------|
| Signature of Attorney for Debtor | <u> </u> | MM / DD / YYYY |
| Athena Inembolidis 0079362 | | |
| Printed name | | |
| Athena Legal, LLC. | | |
| 625 City Park Avenue Columbus, OH 43206 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone 614-222-0055 | Email address | Athena@AthenaLegal.com |
| 0079362 OH | | |
| Bar number & State | | |

| | | | Document | Page 8 of 47 | | |
|--------|--|---|--|--|-------------|----------------------------------|
| Fill | in this inform | nation to identify your | case: | | | |
| Deb | otor 1 | Robert Elige Cum | | | | |
| Deb | otor 2 | First Name | Middle Name | Last Name | | |
| | use if, filing) | First Name | Middle Name | Last Name | | |
| Unit | ted States Bar | nkruptcy Court for the: | SOUTHERN DISTRICT OF O | HIO | | |
| | se number | | | | | |
| (if kn | own) | | | | _ | ck if this is an Inded filing |
| | , | | | | amo | laca liilig |
| ∩f | ficial Ear | rm 106Sum | | | | |
| | | | and Liahilities and C | ertain Statistical Information | | 12/15 |
| Be a | s complete a rmation. Fill c original forn | nd accurate as possib out all of your schedule | le. If two married people are fi | lling together, both are equally responsible formation on this form. If you are filing amend | | ng correct |
| · ui | Cummi | 21120 1 Gai 7100010 | | | V | |
| | | | | | | assets of what you own |
| 1. | Schedule A | /B: Property (Official Fo | orm 106A/B) | | _ | 422 800 00 |
| | 1a. Copy line | e 55, Total real estate, f | rom Schedule A/B | | \$ | 133,800.00 |
| | 1b. Copy line | e 62, Total personal pro | perty, from Schedule A/B | | \$ | 6,765.00 |
| | 1c. Copy line | e 63, Total of all property | y on Schedule A/B | | \$ | 140,565.00 |
| Par | t 2: Summa | arize Your Liabilities | | | | |
| | | | | | Your | iabilities |
| | | | | | | nt you owe |
| 2. | | | laims Secured by Property (Officen A, Amount of claim, at the bo | ial Form 106D) httom of the last page of Part 1 of <i>Schedule D</i> | \$ | 131,778.00 |
| 3. | | | Unsecured Claims (Official Form 1 (priority unsecured claims) from | n 106E/F) m line 6e of <i>Schedule E/F</i> | \$ | 6,000.00 |
| | 3b. Copy the | e total claims from Part | 2 (nonpriority unsecured claims) | from line 6j of Schedule E/F | \$ | 0.00 |
| | | | | Your total liabilities | \$ | 137,778.00 |
| Par | t 3: Summa | arize Your Income and | Expenses | | | |
| 4. | | Your Income (Official Foombined monthly incom | | | \$ | 3,693.00 |
| 5. | | Your Expenses (Official nonthly expenses from li | | | \$ | 1,683.00 |
| Par | t 4: Answe | r These Questions for | Administrative and Statistical | Records | | |
| 6. | - | • | er Chapters 7, 11, or 13? on this part of the form. Check t | his box and submit this form to the court with yo | ur other so | chedules. |
| 7. | YesWhat kind of | of debt do you have? | | | | |
| | Your de | ebts are primarily con | sumer debts. Consumer debts a | are those "incurred by an individual primarily for | a persona | l, family, or |

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Debtor 1 Robert Elige Cummerlander, Sr.

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,951.50 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following: | Total | claim |
|--|-------|----------|
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 6,000.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 6,000.00 |

| Ca | se 2:18-bk-51 | 538 DOC 1 | _ | ea 03/19/ :ument | /18 Entered 03/1 Page 10 of 47 | 19/18 18: | 10:41 | Desc Main |
|----------------------------------|---|----------------------------|------------|-------------------------------------|---|---|--|---|
| ill in this int | ormation to identify | your case and th | | | 1 7000, 10 01 47 | | | |
| Debtor 1 | Robert Elige | Cummerlande | r, Sr. | | | | | |
| | First Name | | Name | | Last Name | | | |
| Debtor 2 Spouse, if filing) | First Name | Middle | Name | | Last Name | | | |
| Inited States | Bankruptcy Court for | the: SOUTHER | N DIST | RICT OF OH | IO | | | |
| ase number | | | | | | | | |
| ase number | | | | | <u> </u> | | | Check if this is a amended filing |
| | | | | | | | | |
| Official F | orm 106A/B | <u>}</u> | | | | | | |
| Schedi | ule A/B: Pr | operty | | | | | | 12/15 |
| formation. If r nswer every q | nore space is needed, a uestion. | attach a separate sł | heet to th | his form. On tl | le are filing together, both ar ne top of any additional page wn or Have an Interest In | | | |
| ☐ No. Go to ■ Yes. Whe | Part 2. ere is the property? | | | | | | | |
| .1 | lalahira Dr | | What | t is the proper | ty? Check all that apply | | | |
| | alshire Dr. ess, if available, or other des | cription | | | | not deduct secured claims or exemptions. Pramount of any secured claims on Schedule | | |
| | | | | • | n or cooperative | Creditors V | Vho Have Claii | ms Secured by Property. |
| | | | | Manufacture | d or mobile home | Current va | lue of the | Current value of the |
| Columb | ous OH State | 43232-0000 ZIP Code | | | ron orb. | entire proj | perty? 33,800.00 | portion you own? \$133,800.0 |
| City | State | ZIF Code | | • | торену | | | |
| | | | | Other | | (such as f | ee simple, ten | our ownership interest ancy by the entireties, o |
| | | | Who | | st in the property? Check one | Fee sim | e), if known. ple | |
| Frankli | n | | | - | | | <u>. </u> | |
| County | | | | | Debtor 2 only | - Check | r if this is com | nmunity property |
| | | | | | of the debtors and another | (see in | structions) | indinty property |
| | | | | r information y erty identificat | you wish to add about this it tion number: | em, such as lo | cal | |
| | | | | | | | | |
| | | | | | | | | |
| Add the c | dollar value of the po | ortion you own fo | r all of | vour entries | from Part 1, including an | v entries for | | |
| | | | | | art 1, moidding an | | .=> | \$133,800.00 |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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Case number (if known) Document Robert Elige Cummerlander, Sr. Debtor 1 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Do not deduct secured claims or exemptions. Put **GMC** Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Envoy Creditors Who Have Claims Secured by Property. Model Debtor 1 only 2003 Year: Debtor 2 only Current value of the Current value of the 255,000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another **Good condition** \$1,432.00 \$1,432.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put **Buick** Who has an interest in the property? Check one 3.2 Make: the amount of any secured claims on Schedule D: Rendevouz Creditors Who Have Claims Secured by Property. ■ Debtor 1 only Model: 2003 Debtor 2 only Current value of the Current value of the 110,000 portion you own? Approximate mileage: Debtor 1 and Debtor 2 only entire property? Other information: At least one of the debtors and another **Good condition** \$1,298.00 \$1,298.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$2,730.00 Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... \$3,000.00 **Used Furniture** 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

■ No

☐ Yes. Describe.....

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No

☐ Yes. Describe.....

Case 2:18-bk-51538 Doc 1 Filed 03/19/18 Entered 03/19/18 18:10:41 Page 12 of 47 Document Case number (if known) Robert Elige Cummerlander, Sr. Debtor 1 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$200.00 **Used Clothing** 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ No Yes. Describe..... \$400.00 Wedding Band and Anniversary Ring 13. Non-farm animals Examples: Dogs, cats, birds, horses ☐ No Yes. Describe..... \$0.00 Dog, sentimental value 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No \square Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3,600.00 for Part 3. Write that number here Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

Part 4: Describe Your Financial Assets

16. Cash

☐ Yes.....

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

Institution name: Yes.....

> Fifth Third Bank \$285.00 17.1. Checking

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Case number (if known) Document Robert Elige Cummerlander, Sr. Debtor 1

| | | 17.2. | Savings | Fifth Third Bank | | \$150.0 |
|-----|---|-----------------------|--|--|--------------------------------------|---------------------------------------|
| 18 | . Bonds, mutual funds, Examples: Bond funds, ■ No | | | okerage firms, money market acco | punts | |
| | ☐ Yes | | Institution or issuer | name: | | |
| 19 | . Non-publicly traded st joint venture □ No | ock and | interests in incorp | orated and unincorporated busi | nesses, including an interest in | an LLC, partnership, an |
| | ■ Yes. Give specific info | | about them me of entity: | | % of ownership: | |
| | | | btor is a Bail Bor come | ndsman and earns 1099 | % | \$0.0 |
| 20 | Negotiable instruments | include poents are | personal checks, cas those you cannot tra | otiable and non-negotiable instrushiers' checks, promissory notes, ansfer to someone by signing or de | and money orders. | |
| 21 | . Retirement or pension Examples: Interests in I ■ No □ Yes. List each accoun | IRA, ERIS | SA, Keogh, 401(k), 4 | 403(b), thrift savings accounts, or o | other pension or profit-sharing plar | ns |
| 22 | | d deposit | ts you have made so | that you may continue service or public utilities (electric, gas, water Institution name or individu |), telecommunications companies | , or others |
| 23 | . Annuities (A contract fo | or a perio | dic payment of mone | ey to you, either for life or for a nur | mber of years) | |
| | ■ No □ YesIs: | suer nam | ne and description. | | | |
| 24 | 26 U.S.C. §§ 530(b)(1), § ■ No | 529A(b), | and 529(b)(1). | ualified ABLE program, or unde | | m. |
| | Yes In: | stitution r | name and description | n. Separately file the records of an | y interests.11 U.S.C. § 521(c): | |
| 25 | Trusts, equitable or fut■ No□ Yes. Give specific info | | | other than anything listed in line | 1), and rights or powers exercis | sable for your benefit |
| 26 | , , , , , | nain nam | es, websites, procee | nd other intellectual property eds from royalties and licensing ag | reements | |
| 27 | Licenses, franchises, a Examples: Building per ■ No | and othe mits, exc | er general intangible lusive licenses, coop | es perative association holdings, liquo | or licenses, professional licenses | |
| | Yes. Give specific info | | about them | | | Command or local of the |
| IVI | oney or property owed t | o you? | | | | Current value of the portion you own? |

Official Form 106A/B

Do not deduct secured

Case 2:18-bk-51538 Doc 1 Filed 03/19/18 Entered 03/19/18 18:10:41 Desc Main Document Page 14 of 47 Case number (if known) Robert Elige Cummerlander, Sr. Debtor 1 claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$435.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.

If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7. ☐ Yes. Go to line 47.

Official Form 106A/B Schedule A/B: Property page 5

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Case number (if known)

Document

Robert Elige Cummerlander, Sr. Debtor 1

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

| Part | 8: List the Totals of Each Part of this Form | | | | |
|------|---|---|------------|------------------------------|--------------|
| 55. | Part 1: Total real estate, line 2 | | | | \$133,800.00 |
| 56. | Part 2: Total vehicles, line 5 | | \$2,730.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | | \$3,600.00 | | |
| 58. | Part 4: Total financial assets, line 36 | | \$435.00 | | |
| 59. | Part 5: Total business-related property, line 45 | | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 | + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | | \$6,765.00 | Copy personal property total | \$6,765.00 |

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$140,565.00

Official Form 106A/B Schedule A/B: Property page 6 Case 2:18-bk-51538 Doc 1 Filed 03/19/18 Entered 03/19/18 18:10:41 Desc Main

| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-----------|------------------------------------|
| Debtor 1 | Robert Elige Cum | nmerlander, Sr. | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | SOUTHERN DISTRICT | OF OHIO | |
| Case number | | | | |
| (if known) | | - | | Check if this is an amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Identify the Property You Claim as Exem |
|---|
|---|

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption | | |
|--|--------------------------------------|-----|---|---|--|--|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | | |
| 5465 Walshire Dr. Columbus, OH 43232 Franklin County | \$133,800.00 | | \$136,925.00 | Ohio Rev. Code Ann. § 2329.66(A)(1) | | |
| Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | 2020.00(//)(1) | | |
| 2003 GMC Envoy 255,000 miles Good condition | \$1,432.00 | | \$680.00 | Ohio Rev. Code Ann. § 2329.66(A)(2) | | |
| Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | 2020.00(1.1)(2) | | |
| Used Furniture | \$3,000.00 | | \$3,000.00 | Ohio Rev. Code Ann. § 2329.66(A)(4)(a) | | |
| Zino nom concedency v. Z. Co. | | | 100% of fair market value, up to any applicable statutory limit | | | |
| Used Clothing | \$200.00 | | \$200.00 | Ohio Rev. Code Ann. § 2329.66(A)(4)(a) | | |
| 2.10.10.11.00.100.00.00.00.00.00.00.00.00 | | | 100% of fair market value, up to any applicable statutory limit | 2020:00(: ·,/(+)/(u) | | |
| Wedding Band and Anniversary Ring | \$400.00 | | \$400.00 | Ohio Rev. Code Ann. § 2329.66(A)(4)(b) | | |
| Ello Holli Golleddio 7/D. 1211 | | | 100% of fair market value, up to any applicable statutory limit | | | |

Filed 03/19/18 Entered 03/19/18 18:10:41 Desc Main Case 2:18-bk-51538 Document Page 17 of 47 Debtor 1 Robert Elige Cummerlander, Sr. Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Checking: Fifth Third Bank** Ohio Rev. Code Ann. § \$295 AA \$285.00

| Line from Schedule A/B: 17.1 | | \$265.00 | | \$265.00 | 2329.66(A)(3) | | | | |
|------------------------------|---|----------|--|---|-------------------------------------|--|--|--|--|
| Lii | io nom conocale 775. | | | 100% of fair market value, up to any applicable statutory limit | 2020:00(/:)(0) | | | | |
| | vings: Fifth Third Bank | \$150.00 | | \$150.00 | Ohio Rev. Code Ann. § 2329.66(A)(3) | | | | |
| Lii | io non concare 775. | | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | Are you claiming a homestead exemption of more than \$160,375? Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) | | | | | | | | |
| | No | | | | | | | | |
| | Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? | | | | | | | | |
| | □ No | | | | | | | | |
| | ☐ Yes | | | | | | | | |
| | | | | | | | | | |

Doc 1

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| | | Document | Page 1 | 18 of 47 | | |
|--|--------------------|---|-----------------------|--|--------------------------|--------------------|
| Fill in this information | to identify you | r case: | | | | |
| Debtor 1 Rol | hert Elige Cu | mmerlander, Sr. | | | | |
| | Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) First | Name | Middle Name | Last Name | | | |
| United States Bankruptc | v Court for the: | SOUTHERN DISTRICT OF | ОНЮ | | | |
| | , | | | | | |
| Case number | | | | | | |
| (if known) | | | | | | if this is an |
| | | | | | ameno | ded filing |
| Official Form 106 | SD. | | | | | |
| | | | _ | | | |
| Schedule D: C | reditors | Who Have Claims | s Secure | ed by Propert | У | 12/15 |
| Re as complete and accura | ate as nossible li | f two married people are filing toge | ether both are | equally responsible for su | innlying correct informa | tion If more space |
| is needed, copy the Addition | | out, number the entries, and attach | | | | |
| number (if known). | | | | | | |
| 1. Do any creditors have cl | • | | | | | |
| ☐ No. Check this bo | ox and submit th | nis form to the court with your oth | ner schedules. | You have nothing else t | o report on this form. | |
| Yes. Fill in all of the | he information b | pelow. | | | | |
| Part 1: List All Secu | red Claims | | | | | |
| | | nore than one secured claim, list the | creditor congret | Column A | Column B | Column C |
| for each claim. If more than | one creditor has | a particular claim, list the other credi | tors in Part 2. As | | Value of collateral | Unsecured |
| much as possible, list the cla | aims in alphabetic | cal order according to the creditor's n | ame. | Do not deduct the value of collateral. | that supports this claim | portion If any |
| 2.1 Ditech Financia | I. LLC | Describe the property that secure | es the claim: | \$128,286.00 | \$133,800.00 | \$0.00 |
| Creditor's Name | | 5465 Walshire Dr. Columb | | | | |
| | | 43232 Franklin County | ,, | | | |
| PO Box 6154 | | As of the date you file the claim | io. Ob a ala all dhad | | | |
| Rapid City, SD | | As of the date you file, the claim apply. | IS: Check all that | | | |
| 57709-6154 | | ☐ Contingent | | | | |
| Number, Street, City, Sta | te & Zip Code | ☐ Unliquidated | | | | |
| 14/1 (1 1 1 1 0 0) | | ☐ Disputed | | | | |
| Who owes the debt? Che | eck one. | Nature of lien. Check all that appl | | | | |
| Debtor 1 only | | | as mortgage or s | secured | | |
| Debtor 2 only | | _ | | | | |
| Debtor 1 and Debtor 2 o | | ☐ Statutory lien (such as tax lien, r | mechanic's lien) | | | |
| ☐ At least one of the debto | | Judgment lien from a lawsuit | Mortgog | _ | | |
| ☐ Check if this claim rela community debt | ites to a | Other (including a right to offset) | Mortgage | e | | |
| | | | | | | |
| Date debt was incurred | 2003 | Last 4 digits of account nu | ımber | | | |
| | | | | | | |
| Santander Cons | sumer | | | ¢2.022.00 | ¢4 422 00 | ¢600.00 |
| Creditor's Name | | Describe the property that secure | | \$2,032.00 | \$1,432.00 | \$600.00 |
| Creditor's Name | | 2003 GMC Envoy 255,000 Good condition | miles | | | |
| PO Box 961245 | | Good Condition | ļ | | | |
| Fort Worth, TX | | As of the date you file, the claim | is: Check all that | • | | |
| 76161-1245 | | apply. Contingent | | | | |
| Number, Street, City, Sta | te & Zip Code | ☐ Unliquidated | | | | |
| | | Disputed | | | | |
| Who owes the debt? Che | eck one. | Nature of lien. Check all that appl | y. | | | |
| ■ Debtor 1 only | | ☐ An agreement you made (such a | | secured | | |
| Debtor 2 only | | car loan) | | | | |
| Debtor 1 and Debtor 2 o | nly | ☐ Statutory lien (such as tax lien, r | mechanic's lien) | | | |
| ☐ At least one of the debto | | ☐ Judgment lien from a lawsuit | , | | | |
| ☐ Check if this claim rela | ites to a | Other (including a right to offset) | Purchase | e Money Security | | |
| community debt | | (1 1 1 5 1 1 g 1 1 1 2 1 1 1 0 0) | | | | |
| Date debt was incurred | 2006 | Last 4 digits of account nu | ımber | | | |
| uoni muo mountou | | -us argins or account in | | | | |

Official Form 106D

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| Debtor 1 Robert Elige Cummerla First Name Middle N | _ Case | Case number (if know) | | | | | |
|---|--|------------------------|---------------------------|---------------------------|-------------|--|--|
| 2.3 TitleMax of Ohio Creditor's Name | Describe the property that secures to 2003 Buick Rendevouz 110,0 | | \$1,460.00 | \$1,298.00 | \$162.00 | | |
| 15 Bull St. Suite 200 Savannah, GA 31401 | miles Good condition As of the date you file, the claim is: apply. Contingent | Check all that | | | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated☐ Disputed | | | | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | | | | |
| ■ Debtor 1 only | An agreement you made (such as i | mortgage or secured | | | | | |
| Debtor 2 only | car loan) | | | | | | |
| Debtor 1 and Debtor 2 only | Statutory lien (such as tax lien, med | chanic's lien) | | | | | |
| ☐ At least one of the debtors and another ☐ Check if this claim relates to a | ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) | Non-Purchase | Money Security | | | | |
| community debt Date debt was incurred 9/3/2014 | Last 4 digits of account numl | ber | | | | | |
| | | | | | | | |
| Add the dollar value of your entries in C | Column A on this page. Write that num | ber here: | \$131,778.0 | 0 | | | |
| If this is the last page of your form, add | | | \$131,778.0 | | | | |
| Write that number here: | | | Ψ101,770.0 | <u> </u> | | | |
| Part 2: List Others to Be Notified for | or a Debt That You Already Listed | | | | | | |
| Use this page only if you have others to be trying to collect from you for a debt you of than one creditor for any of the debts that debts in Part 1, do not fill out or submit the | owe to someone else, list the creditor i t you listed in Part 1, list the additiona | in Part 1, and then li | st the collection agend | y here. Similarly, if yoυ | ı have more | | |
| Name, Number, Street, City, State & Franklin County Treasurer 373 S. High Street | Zip Code | | e in Part 1 did you enter | the creditor? 2.1 | | | |
| 17th Floor Columbus, OH 43215 | | | | | | | |
| Name, Number, Street, City, State & Mount Carmel | Zip Code | On which line | e in Part 1 did you enter | the creditor? 2.1 | | | |
| 6150 E. Broad Street Columbus, OH 43213-1574 | | Last 4 digits | of account number | | | | |
| Name, Number, Street, City, State & Ohio Department of Taxatic | | On which line | e in Part 1 did you enter | the creditor? 2.1 | | | |
| Bankruptcy Division PO Box 530 Columbus, OH 43216-0530 | J11 | Last 4 digits | of account number | | | | |
| Name, Number, Street, City, State & | Zip Code | On which line | e in Part 1 did you enter | the creditor? 2.1 | | | |
| Phyllis Cummerlander 5465 Walshire Dr. Columbus, OH 43232 | | Last 4 digits | of account number | | | | |
| Name, Number, Street, City, State & Reimer, Arnovitz, Cherneck | · | On which line | e in Part 1 did you enter | the creditor? 2.1 | | | |
| 30455 Solon Road Solon, OH 44139 | • | Last 4 digits | of account number | | | | |

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| | | Document | Page | 20 of 47 | 7 | | |
|--|---|--|---|--|---|--|--|
| Fill in this inform | nation to identify your | case: | | | | | |
| Debtor 1 | Robert Elige Cum | merlander. Sr. | | | | | |
| | First Name | Middle Name | Last Name | 1 | | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | 1 | | | |
| | | | | | | | |
| United States Bar | nkruptcy Court for the: | SOUTHERN DISTRICT OF C | DHIO | | | | |
| Case number | | | | | | | |
| (if known) | | | | | | _ | if this is an ed filing |
| | | | | | | amend | ea illing |
| Official Form | n 106E/F | | | | | | |
| Schedule E | /F: Creditors W | ho Have Unsecured | d Claims | 5 | | | 12/15 |
| any executory control Schedule G: Execut Schedule D: Credito left. Attach the Conname and case nun | racts or unexpired leases tory Contracts and Unexpors Who Have Claims Sectinuation Page to this pagnber (if known). | e Part 1 for creditors with PRIORI that could result in a claim. Also ired Leases (Official Form 106G). ured by Property. If more space is e. If you have no information to re | list executor Do not inclus needed, cor | ry contracts on de any credit py the Part yo | on Schedule A/B: Fors with partially sou need, fill it out, i | roperty (Official For ecured claims that a number the entries in | n 106A/B) and on re listed in the boxes on the |
| | II of Your PRIORITY Un | | | | | | |
| 1. Do any credito No. Go to Pa | ors have priority unsecure | a ciaims against you? | | | | | |
| _ | aπ 2. | | | | | | |
| Yes. | nriority unsecured claims | . If a creditor has more than one pr | iority unsecur | ed claim list t | he creditor separate | ly for each claim. For | each claim listed |
| identify what typ possible, list the | pe of claim it is. If a claim ha e claims in alphabetical orde | s had credited has more than one prosts as both priority and nonpriority amoust according to the creditor's name. I tricular claim, list the other creditors | ınts, list that c If you have m | laim here and | show both priority a | nd nonpriority amount | s. As much as |
| (For an explana | ation of each type of claim, s | ee the instructions for this form in the | ne instruction | | Total claim | Priority amount | Nonpriority amount |
| 2.1 Internal | Revenue Service | Last 4 digits of acco | unt number | | \$6,000.00 | \$5,000.00 | \$1,000.00 |
| Priority Cre PO Box | editor's Name | When was the debt i | ncurred? | 2010 | | | |
| | 75-6 Iphia, PA 19101-7346 | | illoui rou i | 2010 | | - | |
| Number St | treet City State ZIp Code | As of the date you fil | le, the claim | is: Check all t | hat apply | | |
| _ | d the debt? Check one. | ☐ Contingent | | | | | |
| ■ Debtor 1 o | • | Unliquidated | | | | | |
| Debtor 2 o | - | ☐ Disputed | | | | | |
| Debtor 1 a | nd Debtor 2 only | Type of PRIORITY u | | im: | | | |
| At least on | e of the debtors and anothe | Domestic support | obligations | | | | |
| | his claim is for a commur | _ | | • | | | |
| Is the claim s ■ No | subject to offset? | ☐ Claims for death o | . , | , , | | | |
| ☐ Yes | | Other. Specify | | | | | |
| | | | | | | | |
| | I of Your NONPRIORIT | | | | | | |
| • | | ured claims against you? | | | | | |
| No. You have | ve nothing to report in this pa | art. Submit this form to the court wit | h your other s | chedules. | | | |
| ☐ Yes. | | | | | | | |
| Part 3: List Of | thers to Be Notified Ab | out a Debt That You Already | Listed | | | | |
| is trying to collect | ct from you for a debt you one creditor for any of the | notified about your bankruptcy, owe to someone else, list the ori debts that you listed in Parts 1 o ot fill out or submit this page. | ginal credito | r in Parts 1 o | r 2, then list the co | llection agency here | Similarly, if you |
| Part 4: Add th | ne Amounts for Each T | pe of Unsecured Claim | | | | | |
| | ts of certain types of unse | cured claims. This information is | for statistica | al reporting p | urposes only. 28 L | J.S.C. §159. Add the a | amounts for each |
| | | | | | Total C | aim | |
| | 6a. Domestic support of | bligations | | 6a. | \$ | 0.00 | |

Official Form 106 E/F

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Debtor 1 Robert Elige Cummerlander, Sr.

| Total claims from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | C 000 00 |
|--------------------------------|-----|---|-----|-----|-------------|
| II OIII Fait I | | • • | | · · | 6,000.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 6,000.00 |
| | | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ | 0.00 |
| Total claims from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that | | | |
| | og. | you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 0.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 0.00 |

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| | | | 111 1 AUG ZZ UI 4 7 | |
|---|-------------------------|-------------------|--------------------------------|-----------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Robert Elige Cun | nmerlander, Sr. | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | SOUTHERN DISTRICT | OF OHIO | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is ar |
| | | | | amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with Name, Number | whom you have the r, Street, City, State and ZIF | e contract or lease | State what the contract or lease is for |
|-----|-----------|------------------------------|--|---------------------|---|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | |
| 2.4 | <u> </u> | | Ciaio | | |
| | Name | | | | _ |
| | Number | Street | | | <u> </u> |
| | | | | | <u> </u> |
| 2.5 | City | | State | ZIP Code | |
| ∠.5 | Name | | | | _ |
| | | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | |

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| | | Docume | nt Page 23 o | of 47 | |
|--------------------------------|--|---|------------------------|--|----|
| Fill in this i | nformation to identify your | case: | | | |
| Debtor 1 | Robert Elige Cun | nmerlander, Sr. | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing |) First Name | Middle Name | Last Name | | |
| | es Bankruptcy Court for the: | SOUTHERN DISTRICT | | | |
| 0 | | | | | |
| Case number | er | | | ☐ Check if this is an amended filing | |
| Ott: o: o1 | Farm 40011 | | | | |
| | Form 106H | -1.4 | | | |
| Schedu | ule H: Your Cod | ebtors | | 12/15 | |
| ill it out, and our name a | | boxes on the left. Attach . Answer every question. | the Additional Page to | tion. If more space is needed, copy the Additional Page to this page. On the top of any Additional Pages, write as a codebtor. | ٠, |
| ■ No | | | | | |
| ■ No | | | | | |
| | in the last 8 years, have you , California, Idaho, Louisiana | | | ry? (Community property states and territories include ington, and Wisconsin.) | |
| | Go to line 3. Did your spouse, former spo | use, or legal equivalent live | with you at the time? | | |
| in line 2 | 2 again as a codebtor only i 06D), Schedule E/F (Officia | f that person is a guarant | or or cosigner. Make s | r if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Offici 16G). Use Schedule D, Schedule E/F, or Schedule G to f | al |
| | olumn 1: Your codebtor ame, Number, Street, City, State and Z | IP Code | | Column 2: The creditor to whom you owe the debt Check all schedules that apply: | |
| 3.1 | | | | ☐ Schedule D, line | |
| | ame | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| | umber Street | | | _ | |
| Ci | ity | State | ZIP Code | | |
| 3.2 | | | | ☐ Schedule D, line | _ |
| | ame | | | Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| N | umber Street | | | _ | |

State

City

ZIP Code

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| Fill | in this information to identify your c | asa. | | | | 1 | | | |
|-------------|---|----------------------------|----------------------------------|-------------|-------|----------------------|---------------------------|------------------------|-------|
| | - | e Cummerlander, Sr. | | | | | | | |
| | otor 2 use, if filing) | | | | _ | | | | |
| Uni | ted States Bankruptcy Court for the | : SOUTHERN DISTRIC | CT OF OHIO | | _ | | | | |
| | se number | | - | | | | ded filing ment showin | g postpetition cha | apter |
| 0 | fficial Form 106I | | | | | MM / DD | / YYYY | | |
| S | chedule I: Your Inc | ome | | | | | | | 12/15 |
| spo atta | plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment | r spouse is not filing w | ith you, do not includ | de infor | matio | on about your s | pouse. If me | ore space is nee | eded, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debto | r 2 or non-fi | ling spouse | |
| | If you have more than one job, attach a separate page with | Employment status | ■ Employed | ployed | | | ■ Employed | | |
| | information about additional employers. | ,, | ☐ Not employed | | | ☐ Not | employed | | |
| | | Occupation | Sales | | | Disab | led | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Green Lawn Cer | netery | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 1000 Greenlawn Columbus, OH 4 | | | | | | |
| | | How long employed t | here? 1 year | | | | | | _ |
| Par | t 2: Give Details About Mor | nthly Income | | | | | | | |
| | mate monthly income as of the duse unless you are separated. | ate you file this form. If | you have nothing to re | port for | any | ine, write \$0 in tl | ne space. Ind | clude your non-fil | ing |
| | u or your non-filing spouse have mo e space, attach a separate sheet to | | ombine the information | n for all e | emplo | oyers for that per | son on the li | nes below. If you | need |
| | | | | | | For Debtor 1 | | btor 2 or ng spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 2,333.00 | <u> </u> | 0.00 | |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | 0.00 | +\$ | 0.00 | |

2,333.00

0.00

Calculate gross Income. Add line 2 + line 3.

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| Deb | otor 1 | Robert Elige Cummerlander, Sr. | - | C | Case | number (<i>if known</i>) | _ | | | | |
|-----|--------------------------|---|------|------------|------|----------------------------|---|--------|---------------|-------|---------------------|
| | | | | | F | Dobtos 1 | | For D | alata u | 2 | |
| | | | | | For | Debtor 1 | | For De | | | |
| | Copy | y line 4 here | 4. | | \$ | 2,333.00 | | \$ | 9 0 | 0.0 | |
| 5. | List | all payroll deductions: | | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a | ١. | \$ | 258.00 | | \$ | | 0.0 | 0 |
| | 5b. | Mandatory contributions for retirement plans | 5b | ١. | \$ | 0.00 | | \$ | | 0.0 | 0 |
| | 5c. | Voluntary contributions for retirement plans | 5c. | | \$ | 0.00 | | \$ | | 0.0 | 0 |
| | 5d. | Required repayments of retirement fund loans | 5d | ١. | \$ | 0.00 | | \$ | | 0.0 | 0 |
| | 5e. | Insurance | 5e | / . | \$ | 0.00 | | \$ | | 0.0 | 0 |
| | 5f. | Domestic support obligations | 5f. | | \$ | 0.00 | | \$ | | 0.0 | |
| | 5g. | Union dues | 5g | | \$_ | 0.00 | | \$ | | 0.0 | |
| | 5h. | Other deductions. Specify: | _ 5h | .+ | \$ | 0.00 | + | \$ | | 0.0 | <u>0</u> |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | : | \$ | 258.00 | | \$ | | 0.0 | 0_ |
| 7. | Calc | ulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | : | \$ | 2,075.00 | | \$ | | 0.0 | 0_ |
| 8. | List a 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | | | | |
| | 01 | monthly net income. | 8a | | \$ | 0.00 | | \$ | | 0.0 | |
| | 8b. 8c. | Interest and dividends | 8b | • | \$ | 0.00 | | \$ | | 0.0 | <u>0</u> |
| | | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | | \$ | 0.00 | | \$ | | 0.0 | |
| | 8d. | Unemployment compensation | 8d | | \$ | 0.00 | | \$ | | 0.0 | |
| | 8e. | Social Security | 8e | | \$_ | 0.00 | | \$ | | 0.0 | 0 |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | | \$ | 0.00 | | \$ | | 0.0 | 0 |
| | 8g. | Pension or retirement income | 8g | J. | \$ | 0.00 | | \$ | | 0.0 | 0 |
| | 8h. | Other monthly income. Specify: Bailbonds Income | 8h | .+ | \$ | 438.00 | + | \$ | | 0.0 | 0 |
| | | Disability Income | | | \$ | 0.00 | | \$ | 1, | 180.0 | 0 |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | S | 438.00 | | \$ | 1 | ,180. | 00 |
| 40 | 0-1- | whate monthly become A LLE - 7 - E - 0 | 40 | \$ | | 2 513 00 + \$ | | | | = \$ | |
| 10. | | ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | Ф_ | 7 | 2,513.00 + \$ | _ | 1,180 | J.00 | = \$ | 3,693.00 |
| 11. | State Inclu- other | e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a | depe | | , | • | , | | nedule 11. | | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines | | | | | | | 12. | \$ | 3,693.00 |
| | | | | | | | | | | Comb | oined hly income |
| 13. | Do y | ou expect an increase or decrease within the year after you file this form No. | ? | | | | | | | | ing income |
| | _ | Yes, Explain: | | | | | | | | | |

| WHI | in this informa | ution to identify | our cocc | | | ì | | |
|-------------------|--|--|--------------------------------------|--|-----------------------|------------------|-----------------|---|
| | in this information to the state of the stat | Robert Elige | | rlander, Sr. | | | k if this is: | |
| | otor 2 ouse, if filing) | | | | | | | ving postpetition chapter the following date: |
| Unit | ted States Bankı | ruptcy Court for the | : SOUTH | IERN DISTRICT OF OHIO | _ | - | MM / DD / YYYY | |
| | se number nown) | | | | | | | |
| | | orm 106J | | | | | | |
| Be info nur | as complete ormation. If m mber (if know | nore space is ne n). Answer ever | possible eded, atta ry questio | . If two married people ar ch another sheet to this | | | | |
| Par 1. | t 1: Desci Is this a joir | ribe Your House nt case? | hold | | | | | |
| | ■ No. Go to | | in a separ | ate household? | | | | |
| | □ N □ Y | | st file Offici | al Form 106J-2, <i>Expenses</i> | for Separate House | ehold of Debt | or 2. | |
| 2. | Do you hav | e dependents? | □ No | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | ■ Yes. | Fill out this information for each dependent | Dependent's relati | | Dependent's age | Does dependent live with you? |
| | Do not state dependents | | | | Dependent | | 11 years | □ No ■ Yes □ No □ Yes □ No □ Yes □ Yes |
| 3. | | penses include f people other t | han = | No | | | | □ No □ Yes |
| | | d your depende | | Yes | | | | |
| Est | imate your ex | a date after the l | our bankr | ly Expenses uptcy filing date unless y y is filed. If this is a supp | | | | |
| the | | h assistance an | | government assistance i luded it on <i>Schedule I:</i>) | | | Your exp | enses |
| 4. | | or home owners and any rent for th | | ses for your residence. I | nclude first mortgage | e 4. \$ | | 0.00 |
| | If not include | ded in line 4: | | | | | | |
| | 4a. Real | estate taxes | | | | 4a. \$ | | 0.00 |
| | | erty, homeowner's | | | | 4b. \$ | | 0.00 |
| | | e maintenance, re eowner's associat | | upkeep expenses dominium dues | | 4c. \$ 4d. \$ | | 0.00 |
| 5. | | | | our residence, such as ho | me equity loans | 5. \$ | | 0.00 |

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| ebtor 1 | Robert Elige Cummerlander, Sr. | Case num | ber (if known) | |
|------------------------|---|--------------|----------------|--------------------------|
| . Util | ities: | | | |
| o. Uti i 6a. | Electricity, heat, natural gas | 6a. | \$ | 250.00 |
| 6b. | Water, sewer, garbage collection | 6b. | · | 53.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 126.00 |
| 6d. | Other. Specify: | 6d. | · | 0.00 |
| | od and housekeeping supplies | 7. | \$ | 610.00 |
| | Idcare and children's education costs | 8. | \$ | 0.00 |
| _ | thing, laundry, and dry cleaning | 9. | \$ | 100.00 |
| | sonal care products and services | 10. | \$ | |
| | dical and dental expenses | | \$ | 50.00 |
| | nsportation. Include gas, maintenance, bus or train fare. | 11. | Φ | 116.00 |
| | not include car payments. | 12. | \$ | 250.00 |
| | ertainment, clubs, recreation, newspapers, magazines, and books | 13. | | 0.00 |
| | aritable contributions and religious donations | 14. | · | 0.00 |
| | urance. | | Ψ | 0.00 |
| | not include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | Life insurance | 15a. | \$ | 0.00 |
| 15b | . Health insurance | 15b. | \$ | 0.00 |
| 150 | . Vehicle insurance | 15c. | \$ | 113.00 |
| | l. Other insurance. Specify: | 15d. | \$ | 0.00 |
| | res. Do not include taxes deducted from your pay or included in lines 4 or 20. | | | |
| | ecify: | 16. | \$ | 0.00 |
| | tallment or lease payments: | | | |
| 17a | . Car payments for Vehicle 1 | 17a. | \$ | 0.00 |
| 17b | . Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| 170 | . Other. Specify: | 17c. | \$ | 0.00 |
| 170 | l. Other. Specify: | 17d. | \$ | 0.00 |
| | r payments of alimony, maintenance, and support that you did not report as | | • | 0.00 |
| | lucted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | · · | |
| | ner payments you make to support others who do not live with you. | 10 | \$ | 0.00 |
| | ecify: | 19. | ····· Incomo | |
| | ner real property expenses not included in lines 4 or 5 of this form or on Sch Mortgages on other property | 20a. | | 0.00 |
| | . Real estate taxes | 20a. 20b. | · | |
| | | 20b. 20c. | · | 0.00 |
| | Property, homeowner's, or renter's insurance | 20d. 20d. | · | 0.00 |
| | l. Maintenance, repair, and upkeep expenses . Homeowner's association or condominium dues | | · | 0.00 |
| | | 20e. | | 0.00 |
| . Oth | er: Specify: Dog Expenses | 21. | +\$ | 15.00 |
| 2. Ca l | culate your monthly expenses | | | |
| 228 | . Add lines 4 through 21. | | \$ | 1,683.00 |
| 22b | . Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | · · |
| | . Add line 22a and 22b. The result is your monthly expenses. | | \$ | 1,683.00 |
| | , , , | | · - | |
| | culate your monthly net income. | 22 | Φ. | 0 000 00 |
| | . Copy line 12 (your combined monthly income) from Schedule I. | 23a. | · · | 3,693.00 |
| 23b | . Copy your monthly expenses from line 22c above. | 23b. | -\$ | 1,683.00 |
| 220 | Subtract your monthly expenses from your monthly income. | | | |
| 230 | The result is your <i>monthly net income</i> . | 23c. | \$ | 2,010.00 |
| | | | <u> </u> | |
| 4. Do | you expect an increase or decrease in your expenses within the year after y | ou file this | form? | |
| For | example, do you expect to finish paying for your car loan within the year or do you expect you | | | or decrease because of a |
| | lification to the terms of your mortgage? | | | |
| | | | | |
| | Yes Explain here: None | | | |

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| Fill in this info | rmation to identify your | case: | | | |
|---------------------|--|---------------------------|----------------------------|--|----------------------|
| Debtor 1 | Robert Elige Cun | merlander. Sr. | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States B | ankruptcy Court for the: | SOUTHERN DISTRICT | OF OHIO | | |
| Case number | | | | | |
| (if known) | | | | ☐ Ch | eck if this is an |
| | | | | am | ended filing |
| If two married p | people are filing togethe | an Individual | nsible for supplying corr | ect information. | 12/15 |
| obtaining mone | | n connection with a bank | | Making a false statement, concean fines up to \$250,000, or imprison | |
| Sig | gn Below | | | | |
| Did you pa | ay or agree to pay some | one who is NOT an attor | ney to help you fill out b | ankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | Attach Bankruptcy Petition Declaration, and Signatur | |
| | | | | Declaration, and Signature | e (Oniciai Form 119) |
| | alty of perjury, I declare re true and correct. | that I have read the sumi | mary and schedules filed | d with this declaration and | |
| X /s/ Ro | bert Elige Cummerlaı | nder, Sr. | x | | |
| Rober | rt Elige Cummerlande | | Signature of I | Debtor 2 | |
| Signatu | ure of Debtor 1 | | | | |
| Date | March 19, 2018 | | Date | | |

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| SIII | in this inform | nation to identify you | r casa: | | | | | | |
|----------------|---|--|---|---|---|---|--|--|--|
| | | | | | | | | | |
| Deb | tor 1 | Robert Elige Cur First Name | Middle Name | Last Name | | | | | |
| | tor 2 | | | | | | | | |
| (Spo | use if, filing) | First Name | Middle Name | Last Name | | | | | |
| Unit | ed States Bar | nkruptcy Court for the: | SOUTHERN DISTRICT O | OF OHIO | | | | | |
| Cas (if kno | e number | | | | _ | Check if this is an | | | |
| Sta Be a | s complete a | of Financial | | are filing together, both are | ankruptcy equally responsible for sup | | | | |
| | | n). Answer every ques | • | | , additional pages, while you | ar nume una cace | | | |
| | | | rital Status and Where You | Lived Before | | | | | |
| 1. | What is your | current marital statu | IS? | | | | | | |
| | MarriedNot mar | ried | | | | | | | |
| 2. | During the la | the last 3 years, have you lived anywhere other than where you live now? | | | | | | | |
| | ■ No □ Yes. Lis | t all of the places you l | ived in the last 3 years. Do no | ot include where you live now | <i>i</i> . | | | | |
| | Debtor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there | | | |
| | | | | | ity property state or territor co, Texas, Washington and V | | | | |
| | ■ No □ Yes. Ma | ke sure you fill out <i>Scl</i> | nedule H: Your Codebtors (O | fficial Form 106H). | | | | | |
| Part | Explai | n the Sources of You | r Income | | | | | | |
| | Fill in the tota | I amount of income yo | nployment or from operatin u received from all jobs and a have income that you receiv | all businesses, including part- | | ndar years? | | | |
| | □ No ■ Yes. Fill | in the details. | | | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$3,300.00 | ☐ Wages, commissions, bonuses, tips | | | | |
| | | | ☐ Operating a business | | ☐ Operating a business | | | | |

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Case number (if known) Document

Debtor 1 Robert Elige Cummerlander, Sr.

| | | | | | Debtor 1 | | | | Debtor 2 | | |
|---|---|-------------------------------------|-------------------------------------|--|--|--|---|---------------|--|-------------------------------------|---|
| | | | | | Sources of income Check all that apply. | (befo | ss income are deductions and asions) | | Sources of inco | | Gross income (before deductions and exclusions) |
| | | | dar year: December : | 31, 2017) | ■ Wages, commissions, bonuses, tips | | \$28,381.00 | | ☐ Wages, comr bonuses, tips | missions, | |
| | | | | | ☐ Operating a business | | | | ☐ Operating a b | ousiness | |
| For the calendar year before that: (January 1 to December 31, 2016) | | ■ Wages, commissions, bonuses, tips | | | | ☐ Wages, comr bonuses, tips | missions, | | | | |
| | | | | | ☐ Operating a business | | | | ☐ Operating a b | ousiness | |
| | | | | | ☐ Wages, commissions, bonuses, tips | | \$26,579.00 | | ☐ Wages, comi bonuses, tips | missions, | |
| | | | | | Operating a business | | | | ☐ Operating a b | ousiness | |
| 5. | Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of <i>other income</i> are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. | | | | | | | | | | |
| | | | | | Debtor 1 | | | | Debtor 2 | | |
| | | | | | Sources of income Describe below. | each (befo | s income from source are deductions and asions) | | Sources of inco Describe below. | ome | Gross income (before deductions and exclusions) |
| Pai | rt 3: | List | Certain Pa | yments You | Made Before You Filed for | Bankru | otcy | | | | |
| 6. | _ | | Neither Deindividual puring the No. | ebtor 1 nor D primarily for a 90 days befo Go to line 7 List below e paid that cre not include | each creditor to whom you pai editor. Do not include paymer payments to an attorney for th | imer de ld purpo d you pa d a total hts for do his bank | bts. Consumer deb se." ay any creditor a tota of \$6,425* or more omestic support obli- ruptcy case. | al of in o | f \$6,425* or mor one or more payi ions, such as chi | e? ments and th ld support ar | e total amount you |
| | - v | | • | • | on 4/01/19 and every 3 years | | | ı or | arter the date of | adjustment. | |
| | — Y | es. | | | r both have primarily consure you filed for bankruptcy, di | | | al o | f \$600 or more? | | |
| | | | ■ No. | Go to line 7 | | | | | | | |
| | | | □ Yes | include pay | each creditor to whom you pai ments for domestic support of this bankruptcy case. | | | | | | |
| | Credi | tor's | s Name and | l Address | Dates of payme | nt | Total amount paid | | Amount you still owe | Was this pa | ayment for |

Page 31 of 47 Document Robert Elige Cummerlander, Sr. Case number (if known) Debtor 1 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Amount you Insider's Name and Address Total amount Reason for this payment Dates of payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Greentree Servicing, LLC vs. **Franklin County Common** Civil □ Pending Robert Cummerlander Sr. **Pleas** □ On appeal 2015 CV 000790 Concluded Judgment Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address Value of the **Describe the Property** Date property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes

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Debtor 1 Robert Elige Cummerlander, Sr.

| Pai | t 5: List Certain Gifts and Contributions | 3 | | | |
|-----|--|---------|--|-----------------------------------|---------------------------|
| 13. | Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift. | ıptcy, | did you give any gifts with a total value of more t | han \$600 per person | ? |
| | Gifts with a total value of more than \$600 per person |) | Describe the gifts | Dates you gave the gifts | Value |
| | Person to Whom You Gave the Gift and Address: | | | | |
| 14. | Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co | | did you give any gifts or contributions with a tota | al value of more than | \$600 to any charity? |
| | Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | | Describe what you contributed | Dates you contributed | Value |
| Pai | t 6: List Certain Losses | | | | |
| 15. | Within 1 year before you filed for bankrup or gambling? No Yes. Fill in the details. | otcy or | since you filed for bankruptcy, did you lose any | thing because of the | it, fire, other disaster, |
| | | Doscr | ibe any insurance coverage for the loss | Date of your | Value of property |
| | how the loss occurred | Include | e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property. | loss | lost |
| Pai | t 7: List Certain Payments or Transfers | | | | |
| 16. | consulted about seeking bankruptcy or p | repari | id you or anyone else acting on your behalf pay on a bankruptcy petition? Ts, or credit counseling agencies for services require | , , , | rty to anyone you |
| | □ No ■ Yes. Fill in the details. | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo | ou | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | Athena Legal, LLC. 625 City Park Avenue Columbus, OH 43206 www.athenalegal.com | | \$1000 + \$310 filing fee. Remainder in plan. | 2018 | \$1,000.00 |
| 17. | promised to help you deal with your cred Do not include any payment or transfer that No | itors o | | or transfer any prope | rty to anyone who |
| | Yes. Fill in the details. Person Who Was Paid Address | | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | | | | | |

Case 2:18-bk-51538 Doc 1 Filed 03/19/18 Entered 03/19/18 18:10:41 Desc Main Document Page 33 of 47 Debtor 1 Robert Elige Cummerlander, Sr. Case number (if known) 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Nο Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was **Address** property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Nο Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance account number Address (Number, Street, City, State and ZIP instrument closed, sold, before closing or Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No П Yes. Fill in the details. Name of Financial Institution Describe the contents Do you still Who else had access to it? Address (Number, Street, City, have it? Address (Number, Street, City, State and ZIP Code) State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City,

Yes. Fill in the details.

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

Nο

Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code)

Where is the property? (Number, Street, City, State and ZIP Describe the property

Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Case number (if known) Document

Debtor 1 Robert Elige Cummerlander, Sr.

Dates business existed

0591

From-To 2011-present

EIN:

| | toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. | | | | | | | | | |
|-----|--|---|--------|---|----------|--|--------------------|--|--|--|
| | Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. | | | | | | | | | |
| | | <i>ardous material</i> means anything an en ardous material, pollutant, contaminan | | | us wa | ste, hazardous substance, toxic s | substance, | | | |
| Rep | ort a | II notices, releases, and proceedings the | nat yo | ou know about, regardless of wh | en the | ey occurred. | | | | |
| 24. | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? | | | | | | | | | |
| | | ■ No | | | | | | | | |
| | | Yes. Fill in the details. | | | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | | Governmental unit Address (Number, Street, City, State a ZIP Code) | and | Environmental law, if you know it | Date of notice | | | |
| 25. | Hav | e you notified any governmental unit o | f anv | release of hazardous material? | | | | | | |
| | _ | | | | | | | | | |
| | | No Yes. Fill in the details. | | | | | | | | |
| | Na | me of site dress (Number, Street, City, State and ZIP Code) | | Governmental unit Address (Number, Street, City, State a | and | Environmental law, if you know it | Date of notice | | | |
| | | | | ZIP Code) | | | | | | |
| 26. | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. | | | | | | | | | |
| | | No | | | | | | | | |
| | | Yes. Fill in the details. | | | | | | | | |
| | | se Title se Number | | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Na | ture of the case | Status of the case | | | |
| Par | t 11: | Give Details About Your Business or | Con | nections to Any Business | | | | | | |
| 27. | Witl | hin 4 years before you filed for bankrup | tcv. | did vou own a business or have a | anv of | f the following connections to any | business? | | | |
| | | ☐ A sole proprietor or self-employed | • | • | • | | | | | |
| | | ☐ A member of a limited liability com | | • | • | • | | | | |
| | | ☐ A partner in a partnership | ,,,, | (==0) 000 | ····• (- | , | | | | |
| | | | | | | | | | | |
| | ☐ An officer, director, or managing executive of a corporation | | | | | | | | | |
| | _ | ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | | | | |
| | No. None of the above applies. Go to Part 12. | | | | | | | | | |
| | | Yes. Check all that apply above and fi | | | | Formitation of the control of the co | | | | |
| | Ad | siness Name dress mber, Street, City, State and ZIP Code) | | scribe the nature of the business me of accountant or bookkeeper | | Employer Identification number Do not include Social Security | | | | |

Independent Agent- Bailbonds

Robert Cummerlander Sr.

5465 Walshire Dr.

Columbus, OH 43232

Page 35 of 47 Document Case number (if known) Debtor 1 Robert Elige Cummerlander, Sr. 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Robert Elige Cummerlander, Sr. Signature of Debtor 2 Robert Elige Cummerlander, Sr. Signature of Debtor 1 Date March 19, 2018 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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LBR Form 2016-1(b)

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF OHIO

| In re: | | Case No. |
|--------------------------------|-----------|--------------------------|
| Robert Elige Cummerlander, Sr. | | Chapter 13 |
| | Debtor(s) | Judge C. Kathryn Prestor |

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR AND APPLICATION FOR ALLOWANCE OF FEES IN CHAPTER 13 CASE

| I. | <u>Disclosure</u> | | |
|----|---|--------------|------------------------------------|
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. 2016(b), I certify that I am that compensation paid to me within one year before the filing of the petition is services rendered or to be rendered on behalf of the debtor(s) in contemplation of follows: | n bankruptc | y, or agreed to be paid to me, for |
| F | or legal services, I have agreed to accept | \$ | 3,700.00 |
| P | rior to the filing of this statement I have received | \$ | 1,000.00 |
| В | alance Due | \$ | 2,700.00 |
| 2. | The source of the compensation paid to me was: ■ Debtor □ Other (specify): | | |
| 3. | The source of compensation to be paid to me is: | | |
| | ■ Debtor □ Other (specify): | | |
| 4. | ■ I have not agreed to share the above-disclosed compensation with any other perassociates of my law firm. | rsons unless | they are members and/or |
| | ☐ I have agreed to share the above-disclosed compensation with another person of my law firm. A copy of the agreement, together with a list of the names of t attached. | | |

Application

- I hereby apply for an allowance of fees in the amount set forth above. I understand and agree that the Court may approve, 5. without itemization, an allowance of fees not to exceed \$3,700, for rendering the legal services set forth below. If I seek payment of fees in excess of \$3,700, I will file a separate application that sets forth the total amount of the fee requested, and that includes an itemization of all legal services performed, the amount and itemization of any expenses for which reimbursement is sought, the identification and hourly billing rate of any attorney, paralegal, or other professional person for whom fees are sought, and the actual time spend by the attorney, paralegal, or other professional person for whom fees are sought.
 - a. Initial client interview, preparation and signing of any retainer or representation agreement, analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether, and under what chapter, to file a petition in bankruptcy;
 - b. Advising the debtor concerning his or her obligations and duties pursuant to the Code, the Rules, the Local Rules, applicable court orders, and provisions of his or her chapter 13 plan;
 - Preparation and filing of any document required by § 521 of the Code, including Official Form 122C-1 and Official Form c. 122C-2 (if applicable), the petition, schedules, statement of financial affairs and any amendments thereto that may be
 - d. Preparation and filing of the chapter 13 plan and any preconfirmation amendments thereto that may be required; provided, legal services performed relative to Paragraphs 5.4.1,5.4.2 and 5.4.3 of the chapter 13 plan are not covered by the no-look fee and may be compensated through a separate application for fees; however, in such event, no additional compensation

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will be allowed for the preparation and filing of a motion pursuant to Rule 5009(d).

- e. Preparation and filing of payroll orders and amended payroll orders, except amended payroll orders prepared in connection with the modification of a plan or the temporary suspension of payments;
- f. Representation of the debtor at the § 341 meeting of creditors and confirmation hearing, and at any adjournments thereof;
- g. Filing of address changes for the debtor;
- h. Review of claims;
- i. Review of notice of intention to pay claims;
- j. Preparation and filing of objections to non-real estate and non-tax claims, exclusive of any hearings;
- k. Preparation and filing of first motion to suspend or temporarily reduce plan payments;
- 1. Representation of the debtor in addressing any routine tax return or tax refund inquiries by the trustee, exclusive of any motion, objection, or hearing;
- m. Filing of a notice of final cure payment, when filed by the debtor, exclusive of any hearings;
- n. Preparation and filing of debtor's certification regarding issuance of discharge order;
- o. Routine phone calls and questions;
- p. File maintenance and routine case management; and
- q. Any other duty as required by local decision or policy.

Negotiations with secured creditors to reduce to market value; and exemption planning.

By agreement with the debtor(s), the above-disclosed fee does not include the following services:
 Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

| March 19, 2018 | /s/ Athena Inembolidis | |
|----------------|----------------------------|--|
| Date | Athena Inembolidis 0079362 | |
| | Name | |
| | Athena Legal, LLC. | |
| | 625 City Park Avenue | |

Columbus, OH 43206 614-222-0055 Fax: 614-230-0678 Athena@AthenaLegal.com 0079362 OH

| Fill in this inform | Fill in this information to identify your case: | | | | | |
|---|--|--|--|--|--|--|
| Debtor 1 Robert Elige Cummerlander, Sr. | | | | | | |
| Debtor 2 (Spouse, if filing) | | | | | | |
| United States B | ankruptcy Court for the: Southern District of Ohio | | | | | |
| Case number (if known) | | | | | | |

| Check as directed in lines 17 and 21: | | | |
|---|---|--|--|
| According to the calculations required by this Statement: | | | |
| | 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). | | |
| | Disposable income is determined under 11 U.S.C. § 1325(b)(3). | | |
| | 3. The commitment period is 3 years. | | |
| | 4. The commitment period is 5 years. | | |

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

| | | | | Colur Debte | | Column Debtor non-fili | |
|--|---------------------------------|---------------------|-----------------------------|----------------|----------|------------------------------|------|
| Your gross wages, salary, tips, bonuses, overtime payroll deductions). | , and co | mmissi | ons (before all | \$ | 2,771.50 | \$ | 0.00 |
| Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. | | | a spouse if | \$ | 0.00 | \$ | 0.00 |
| All amounts from any source which are regularly pof you or your dependents, including child suppor from an unmarried partner, members of your househo and roommates. Do not include payments from a spot you listed on line 3. | t. Include ld, your c | e regula depende | contributions nts, parents, | \$ | 0.00 | \$ | 0.00 |
| Net income from operating a business, profession, or farm | Debtor | 1 | | | | | |
| Gross receipts (before all deductions) | \$ | 0.00 | | | | | |
| Ordinary and necessary operating expenses | -\$ | 0.00 | | | | | |
| Net monthly income from a business, profession, or fa | rm \$ | 0.00 | Copy here -> | \$ | 0.00 | \$ | 0.00 |
| Net income from rental and other real property | Debtor | 1 | | | | | |
| Gross receipts (before all deductions) | \$ | 0.00 | | | | | |
| Ordinary and necessary operating expenses | -\$ | 0.00 | | | | | |
| Net monthly income from rental or other real property | \$ | 0.00 | Copy here -> | \$ | 0.00 | \$ | 0.00 |

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Robert Elige Cummerlander, Sr. Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 0.00 \$ 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you____ 0.00 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. **Disability Income** 0.00 1,180.00 0.00 0.00 Total amounts from separate pages, if any. 0.00 0.00 \$ 11. Calculate your total average monthly income. Add lines 2 through 10 for 2,771.50 1,180.00 3,951.50 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 3.951.50 13. Calculate the marital adjustment. Check one: ☐ You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 0.00 Copy here=> 3,951.50 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 3,951.50 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12

15b. The result is your current monthly income for the year for this part of the form.

47,418.00

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Robert Elige Cummerlander, Sr. Debtor 1 Case number (if known) 16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. 16b. Fill in the number of people in your household. 4 16c. Fill in the median family income for your state and size of household. 83.515.00 \$ To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 17b. 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) 18. Copy your total average monthly income from line 11. 3,951.50 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 3,951.50 19b. Subtract line 19a from line 18. \$ 20. Calculate your current monthly income for the year. Follow these steps: 3,951.50 20a. Copy line 19b Multiply by 12 (the number of months in a year). **x** 12 47,418.00 20b. The result is your current monthly income for the year for this part of the form 83,515.00 20c. Copy the median family income for your state and size of household from line 16c \$ 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. Part 4: Sign Below By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. X /s/ Robert Elige Cummerlander, Sr. Robert Elige Cummerlander, Sr. Signature of Debtor 1 Date March 19, 2018 MM / DD / YYYY If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Debtor 1 Robert Elige Cummerlander, Sr.

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 09/01/2017 to 02/28/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Bail Bonds

Income by Month:

| 6 Months Ago: | 09/2017 | \$255.00 |
|---------------|--------------------|----------|
| 5 Months Ago: | 10/2017 | \$422.00 |
| 4 Months Ago: | 11/2017 | \$350.00 |
| 3 Months Ago: | 12/2017 | \$656.00 |
| 2 Months Ago: | 01/2018 | \$315.00 |
| Last Month: | 02/2018 | \$631.00 |
| | Average per month: | \$438.17 |

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Employment**

Income by Month:

| 6 Months Ago: | 09/2017 | \$2,980.00 |
|---------------|--------------------|------------|
| 5 Months Ago: | 10/2017 | \$2,333.00 |
| 4 Months Ago: | 11/2017 | \$1,910.00 |
| 3 Months Ago: | 12/2017 | \$3,482.00 |
| 2 Months Ago: | 01/2018 | \$1,758.00 |
| Last Month: | 02/2018 | \$1,537.00 |
| | Average per month: | \$2,333.33 |

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Debtor 1 Robert Elige Cummerlander, Sr.

Case number (if known)

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period **09/01/2017** to **02/28/2018**.

Line 10 - Income from all other sources Source of Income: Disability Income Constant income of \$1,180.00 per month.

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| • | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Ditech Financial, LLC PO Box 6154 Rapid City, SD 57709-6154

Franklin County Treasurer 373 S. High Street 17th Floor Columbus, OH 43215

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Mount Carmel 6150 E. Broad Street Columbus, OH 43213-1574

Ohio Department of Taxation Bankruptcy Division PO Box 530 Columbus, OH 43216-0530

Phyllis Cummerlander 5465 Walshire Dr. Columbus, OH 43232

Reimer, Arnovitz, Cherneck & Jeffery 30455 Solon Road Solon, OH 44139

Santander Consumer USA PO Box 961245 Fort Worth, TX 76161-1245

TitleMax of Ohio 15 Bull St. Suite 200 Savannah, GA 31401